

Type a plus sign (+) inside this box ->



0010/PTO  
Rev 6/95

U.S. Department of Commerce  
Patent and Trademark Office

## DECLARATION



Declaration  
Submitted OR



Declaration  
Submitted after  
Initial Filing

Attorney Docket Number

1112

First Named Inventor

Cynthia A. Donovan

### COMPLETE IF KNOWN

Application Number

Filing Date

5/25/2000

Group Art Unit

Examiner Name

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled :

METHOD AND APPARATUS FOR CONTROLLING ACCESS TO A WEBSITE

the specification of which

(Title of the Invention)



is attached hereto

OR



was filed on MM/DD/YYYY

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application for which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Copy Attached? Yes No	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto

## DECLARATION

Page 2

I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code § 112. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Firm Name **Law Offices of Charles E. Gottlieb** Payor Number (if applicable) **526-59-8207**

Name	Registration Number	Name	Registration Number
Charles E. Gottlieb	38,164		

☒ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

☒ Please direct all correspondence to: Name **Charles E. Gottlieb**

Address **540 University Avenue**

Address **Suite 300**

City **Palo Alto** State **CA** ZIP **94301**

Country **US** Telephone **650-328-0100** **650-328-2844**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name	<b>Cynthia</b>	Middle Initial	<b>A</b>	Family Name	<b>Donovan</b>	Suffix	
------------	----------------	----------------	----------	-------------	----------------	--------	--

Inventor's Signature *Cynthia A. Donovan* Date *May 12, 2000*

RESIDENCE: City	<b>Lafayette</b>	State	<b>CA</b>	Country	<b>US</b>	Citizenship	<b>US</b>
-----------------	------------------	-------	-----------	---------	-----------	-------------	-----------

POST OFFICE ADDRESS **151 Haslemere Ct.**

City	<b>Lafayette</b>	State	<b>CA</b>	Zip	<b>94549</b>	Country	<b>US</b>	Applicant Authority	
------	------------------	-------	-----------	-----	--------------	---------	-----------	---------------------	--

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

# DECLARATION

## ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, If any:

☐ A petition has been filed for this unsigned inventor

Given Name	Jimmy	Middle Initial		Family Name	Jiang	Suffix	
Inventor's Signature						Date	

RESIDENCE: City	Milpitas	State	CA	Country	US	Citizenship	US
-----------------	----------	-------	----	---------	----	-------------	----

POST OFFICE ADDRESS 1690 Butano Drive

City	Milpitas	State	CA	Zip	95035	Country	US	Applicant Authority	
------	----------	-------	----	-----	-------	---------	----	---------------------	--

Name of Additional Joint Inventor, If any:

☐ A petition has been filed for this unsigned inventor

Given Name	Siamek	Middle Initial	S	Family Name	Ayoubpour	Suffix	
Inventor's Signature						Date	

RESIDENCE: City	San Francisco	State	CA	Country	US	Citizenship	US
-----------------	---------------	-------	----	---------	----	-------------	----

POST OFFICE ADDRESS 3295 Clay Street #4

City	San Francisco	State	CA	Zip	94115	Country	US	Applicant Authority	
------	---------------	-------	----	-----	-------	---------	----	---------------------	--

Name of Additional Joint Inventor, If any:

☐ A petition has been filed for this unsigned inventor

Given Name	Wilfried	Middle Initial	A	Family Name	Kruse	Suffix	
Inventor's Signature						Date	

RESIDENCE: City	San Francisco	State	CA	Country	US	Citizenship	US
-----------------	---------------	-------	----	---------	----	-------------	----

POST OFFICE ADDRESS 2332 Divissadero Street #1

City	San Francisco	State	CA	Zip	94115	Country	US	Applicant Authority	
------	---------------	-------	----	-----	-------	---------	----	---------------------	--

Name of Additional Joint Inventor, If any:

☐ A petition has been filed for this unsigned inventor

Given Name	Michael	Middle Initial	D	Family Name	McIntyre	Suffix	
Inventor's Signature						Date	

RESIDENCE: City	Mill Valley	State	CA	Country	US	Citizenship	US
-----------------	-------------	-------	----	---------	----	-------------	----

POST OFFICE ADDRESS 1114 Western Ave.

City	Mill Valley	State	CA	Zip	94941	Country	US	Applicant Authority	
------	-------------	-------	----	-----	-------	---------	----	---------------------	--

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

005273672 052500

## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet

Name of Additional Joint Inventor, If any:

☐

A petition has been filed for this unsigned inventor

Given  
Name

Purna

Middle  
Initial

C

Family  
Name

Roy

Suffix

Inventor's  
Signature

Date

RESIDENCE: City

San Francisco

State

CA

Country

US

Citizenship

US

POST OFFICE ADDRESS

1846 Larkin St. Apt #5

City

San Francisco

State

CA

Zip

94109

Country

US

Applicant  
Authority

Name of Additional Joint Inventor, If any:

☐

A petition has been filed for this unsigned inventor

Given  
Name

Leon

Middle  
Initial

M

Family  
Name

Traister

Suffix

Inventor's  
Signature

Date

May 12, 2000

RESIDENCE: City

San Francisco

State

CA

Country

US

Citizenship

US

POST OFFICE ADDRESS

3873 26th St.

City

San Francisco

State

CA

Zip

94131

Country

US

Applicant  
Authority

Name of Additional Joint Inventor, If any:

☐

A petition has been filed for this unsigned inventor

Given  
NameMiddle  
InitialFamily  
Name

Suffix

Inventor's  
Signature

Date

RESIDENCE: City

San Francisco

State

Country

Citizenship

POST OFFICE ADDRESS

City

State

Zip

Country

Applicant  
Authority

Name of Additional Joint Inventor, If any:

☐

A petition has been filed for this unsigned inventor

Given  
NameMiddle  
InitialFamily  
Name

Suffix

Inventor's  
Signature

Date

RESIDENCE: City

State

Country

Citizenship

POST OFFICE ADDRESS

City

State

Zip

Country

Applicant  
Authority☐

Additional inventors are being named on supplemental sheet(s) attached hereto

005250 2293250



## DECLARATION

### ATTORNEY and/or AGENT INFORMATION (Supplemental Sheet)

Figure 1 consists of 11 sub-graphs (a-k) showing the percentage of total protein in different cellular fractions over a 120-minute period. The fractions are: a) cytosol, b) nucleus, c) mitochondria, d) lysosomes, e) Golgi apparatus, f) endoplasmic reticulum, g) plasma membrane, h) cell surface, i) extracellular space, j) total protein, and k) total protein. Each graph compares three conditions: Control (open circles), 100  $\mu$ M TBS (filled circles), and 100  $\mu$ M TBS + 100  $\mu$ M TBS (open squares). The y-axis represents the 'Percentage of total protein' (0-100), and the x-axis represents 'Time (min)' (0-120). In most fractions, the percentage of total protein decreases over time, with the most significant decreases seen in the cytosol, nucleus, and mitochondria. The 100  $\mu$ M TBS + 100  $\mu$ M TBS condition generally shows the highest percentage of total protein in most fractions, while the 100  $\mu$ M TBS condition shows the lowest.

Type a plus sign (+) inside this box ->



0010/PTO  
Rev 6/95

U.S. Department of Commerce  
Patent and Trademark Office

## DECLARATION



Declaration  
Submitted  
with Initial Filing

OR



Declaration  
Submitted after  
Initial Filing

Attorney Docket Number

1112

First Named Inventor

Cynthia A. Donovan

### COMPLETE IF KNOWN

Application Number

Filing Date

5/25/2000

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR CONTROLLING ACCESS TO A WEBSITE

the specification of which

(Title of the Invention)



is attached hereto

OR



was filed on MM/DD/YYYY

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application for which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Copy Attached?	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/>	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto

## DECLARATION

Page

I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code § 112. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Firm Name **Law Offices of Charles E. Gotlieb** Payor Number (if applicable) **526-59-8207**

Name	Registration Number	Name	Registration Number
Charles E. Gotlieb	38,164		

☒ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

☒ Please direct all correspondence to: Name **Charles E. Gotlieb**

Address **540 University Avenue**

Address **Suite 300**

City **Palo Alto** State **CA** ZIP **94301**

Country **US** Telephone **650-328-0100** **650-328-2844**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name	<b>Cynthia</b>	Middle Initial	<b>A</b>	Family Name	<b>Donovan</b>	Suffix	
Inventor's Signature						Date	

RESIDENCE: City	<b>Lafayette</b>	State	<b>CA</b>	Country	<b>US</b>	Citizenship	<b>US</b>
-----------------	------------------	-------	-----------	---------	-----------	-------------	-----------

POST OFFICE ADDRESS **151 Haslemere Ct.**

City	<b>Lafayette</b>	State	<b>CA</b>	Zip	<b>94549</b>	Country	<b>US</b>	Applicant Authority	
------	------------------	-------	-----------	-----	--------------	---------	-----------	---------------------	--

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet

Name of Additional Joint Inventor, If any:

☐

A petition has been filed for this unsigned inventor

Given Name	Jimmy	Middle Initial		Family Name	Jiang	Suffix	
------------	-------	----------------	--	-------------	-------	--------	--

Inventor's Signature		Date	
----------------------	--	------	--

RESIDENCE: City	Milpitas	State	CA	Country	US	Citizenship	US
-----------------	----------	-------	----	---------	----	-------------	----

POST OFFICE ADDRESS 1690 Butano Drive

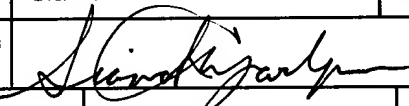
City	Milpitas	State	CA	Zip	95035	Country	US	Applicant Authority	
------	----------	-------	----	-----	-------	---------	----	---------------------	--

Name of Additional Joint Inventor, If any:

☐

A petition has been filed for this unsigned inventor

Given Name	Siamek	Middle Initial	S	Family Name	Ayoubpour	Suffix	
------------	--------	----------------	---	-------------	-----------	--------	--

Inventor's Signature		Date	5/12/2000
----------------------	---	------	-----------

RESIDENCE: City	San Francisco	State	CA	Country	US	Citizenship	US
-----------------	---------------	-------	----	---------	----	-------------	----

POST OFFICE ADDRESS 3295 Clay Street #4


City	San Francisco	State	CA	Zip	94115	Country	US	Applicant Authority	
------	---------------	-------	----	-----	-------	---------	----	---------------------	--

Name of Additional Joint Inventor, If any:

☐

A petition has been filed for this unsigned inventor

Given Name	Wilfried	Middle Initial	A	Family Name	Kruse	Suffix	
------------	----------	----------------	---	-------------	-------	--------	--

Inventor's Signature		Date	05/14/2000
----------------------	---	------	------------

RESIDENCE: City	San Francisco	State	CA	Country	US	Citizenship	US
-----------------	---------------	-------	----	---------	----	-------------	----

POST OFFICE ADDRESS 2332 Divissadero Street #1

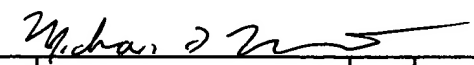
City	San Francisco	State	CA	Zip	94115	Country	US	Applicant Authority	
------	---------------	-------	----	-----	-------	---------	----	---------------------	--

Name of Additional Joint Inventor, If any:

☐

A petition has been filed for this unsigned inventor

Given Name	Michael	Middle Initial	D	Family Name	McIntyre	Suffix	
------------	---------	----------------	---	-------------	----------	--------	--

Inventor's Signature		Date	5-17-2000
----------------------	---	------	-----------

RESIDENCE: City	Mill Valley	State	CA	Country	US	Citizenship	US
-----------------	-------------	-------	----	---------	----	-------------	----

POST OFFICE ADDRESS 1114 Western Ave.


City	Mill Valley	State	CA	Zip	94941	Country	US	Applicant Authority	
------	-------------	-------	----	-----	-------	---------	----	---------------------	--



Additional inventors are being named on supplemental sheet(s) attached hereto



**ADDITIONAL MENTOR(S)**  
Supplemental Sheet

<b>Name of Additional Joint Inventor, If any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor					
<b>Given Name</b>	Purna		<b>Middle Initial</b>	C	<b>Family Name</b>	Roy	<b>Suffix</b>		
<b>Inventor's Signature</b>						<b>Date</b>	05/16/2000		
<b>RESIDENCE: City</b>	San Francisco		<b>State</b>	CA	<b>Country</b>	US	<b>Citizenship</b>	US	
<b>POST OFFICE ADDRESS</b> 1846 Larkin St. Apt #5									
<b>City</b>	San Francisco		<b>State</b>	CA	<b>Zip</b>	94109	<b>Country</b>	US	
			<b>Applicant Authority</b>						
<b>Name of Additional Joint Inventor, If any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor					
<b>Given Name</b>	Leon		<b>Middle Initial</b>	M	<b>Family Name</b>	Traister	<b>Suffix</b>		
<b>Inventor's Signature</b>						<b>Date</b>			
<b>RESIDENCE: City</b>	San Francisco		<b>State</b>	CA	<b>Country</b>	US	<b>Citizenship</b>	US	
<b>POST OFFICE ADDRESS</b> 3873 26th St.									
<b>City</b>	San Francisco		<b>State</b>	CA	<b>Zip</b>	94131	<b>Country</b>	US	
			<b>Applicant Authority</b>						
<b>Name of Additional Joint Inventor, If any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor					
<b>Given Name</b>			<b>Middle Initial</b>		<b>Family Name</b>			<b>Suffix</b>	
<b>Inventor's Signature</b>						<b>Date</b>			
<b>RESIDENCE: City</b>	San Francisco		<b>State</b>		<b>Country</b>		<b>Citizenship</b>		
<b>POST OFFICE ADDRESS</b>									
<b>City</b>			<b>State</b>		<b>Zip</b>		<b>Country</b>		
			<b>Applicant Authority</b>						
<b>Name of Additional Joint Inventor, If any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor					
<b>Given Name</b>			<b>Middle Initial</b>		<b>Family Name</b>			<b>Suffix</b>	
<b>Inventor's Signature</b>						<b>Date</b>			
<b>RESIDENCE: City</b>			<b>State</b>		<b>Country</b>		<b>Citizenship</b>		
<b>POST OFFICE ADDRESS</b>									
<b>City</b>			<b>State</b>		<b>Zip</b>		<b>Country</b>		
			<b>Applicant Authority</b>						
<b>Name of Additional Joint Inventor, If any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor					
<b>Given Name</b>			<b>Middle Initial</b>		<b>Family Name</b>			<b>Suffix</b>	
<b>Inventor's Signature</b>						<b>Date</b>			
<b>RESIDENCE: City</b>			<b>State</b>		<b>Country</b>		<b>Citizenship</b>		
<b>POST OFFICE ADDRESS</b>									
<b>City</b>			<b>State</b>		<b>Zip</b>		<b>Country</b>		
			<b>Applicant Authority</b>						

☐ Additional inventors are being named on supplemental sheet(s) attached hereto



**ATTORNEY and/or AGENT INFORMATION**  
(Supplemental Sheet)

**UNIVERSITY OF CALIFORNIA**

Type a plus sign (+) inside this box ->



0010/PTO  
Rev 6/95

U.S. Department of Commerce  
Patent and Trademark Office

## DECLARATION



Declaration  
Submitted  
with Initial Filing

OR



Declaration  
Submitted after  
Initial Filing

Attorney Docket Number

1112

First Named Inventor

Cynthia A. Donovan

### COMPLETE IF KNOWN

Application Number

Filing Date

5/25/2000

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR CONTROLLING ACCESS TO A WEBSITE

the specification of which

(Title of the invention)



is attached hereto

OR



was filed on MM/DD/YYYY

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application for which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Copy Attached? Yes No
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>



Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto

## DECLARATION

Page 2

I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code § 112. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Firm Name **Law Offices of Charles E. Gottlieb** Payor Number (if applicable) **526-59-8207**

Name	Registration Number	Name	Registration Number
Charles E. Gottlieb	38,164		

☒ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

☒ Please direct all correspondence to: Name **Charles E. Gottlieb**

Address **540 University Avenue**

Address **Suite 300**

City **Palo Alto** State **CA** ZIP **94301**

Country **US** Telephone **650-328-0100** **650-328-2844**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name	<b>Cynthia</b>	Middle Initial	<b>A</b>	Family Name	<b>Donovan</b>	Suffix	
------------	----------------	----------------	----------	-------------	----------------	--------	--

Inventor's Signature		Date	
----------------------	--	------	--

RESIDENCE: City	<b>Lafayette</b>	State	<b>CA</b>	Country	<b>US</b>	Citizenship	<b>US</b>
-----------------	------------------	-------	-----------	---------	-----------	-------------	-----------

POST OFFICE ADDRESS **151 Haslemere Ct.**

City	<b>Lafayette</b>	State	<b>CA</b>	Zip	<b>94549</b>	Country	<b>US</b>	Applicant Authority	
------	------------------	-------	-----------	-----	--------------	---------	-----------	---------------------	--

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

### ADDITIONAL INVENTOR(S) Supplemental Sheet

<b>Name of Additional Joint Inventor, If any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Jimmy		Middle Initial		Family Name	Jiang	Suffix	
Inventor's Signature	<i>[Signature]</i>					Date	1/5/6/00	
RESIDENCE: City	Milpitas		State	CA	Country	US	Citizenship	US
POST OFFICE ADDRESS 1690 Butano Drive								
City	Milpitas	State	CA	Zip	95035	Country	US	Applicant Authority
<b>Name of Additional Joint Inventor, If any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Siamek		Middle Initial	S	Family Name	Ayoubpour	Suffix	
Inventor's Signature						Date		
RESIDENCE: City	San Francisco		State	CA	Country	US	Citizenship	US
POST OFFICE ADDRESS 3295 Clay Street #4								
City	San Francisco	State	CA	Zip	94115	Country	US	Applicant Authority
<b>Name of Additional Joint Inventor, If any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Wilfried		Middle Initial	A	Family Name	Kruse	Suffix	
Inventor's Signature						Date		
RESIDENCE: City	San Francisco		State	CA	Country	US	Citizenship	US
POST OFFICE ADDRESS 2332 Divissadero Street #1								
City	San Francisco	State	CA	Zip	94115	Country	US	Applicant Authority
<b>Name of Additional Joint Inventor, If any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Michael		Middle Initial	D	Family Name	McIntyre	Suffix	
Inventor's Signature						Date		
RESIDENCE: City	Mill Valley		State	CA	Country	US	Citizenship	US
POST OFFICE ADDRESS 1114 Western Ave.								
City	Mill Valley	State	CA	Zip	94941	Country	US	Applicant Authority
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto								

# DECLARATION

## ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, If any:

☐

A petition has been filed for this unsigned inventor

Given Name	Purna	Middle Initial	C	Family Name	Roy	Suffix	
------------	-------	----------------	---	-------------	-----	--------	--

Inventor's Signature		Date	
----------------------	--	------	--

RESIDENCE: City	San Francisco	State	CA	Country	US	Citizenship	US
-----------------	---------------	-------	----	---------	----	-------------	----

POST OFFICE ADDRESS 1846 Larkin St. Apt #5

City	San Francisco	State	CA	Zip	94109	Country	US	Applicant Authority	
------	---------------	-------	----	-----	-------	---------	----	---------------------	--

Name of Additional Joint Inventor, If any:

☐

A petition has been filed for this unsigned inventor

Given Name	Leon	Middle Initial	M	Family Name	Traister	Suffix	
------------	------	----------------	---	-------------	----------	--------	--

Inventor's Signature		Date	
----------------------	--	------	--

RESIDENCE: City	San Francisco	State	CA	Country	US	Citizenship	US
-----------------	---------------	-------	----	---------	----	-------------	----

POST OFFICE ADDRESS 3873 26th St.

City	San Francisco	State	CA	Zip	94131	Country	US	Applicant Authority	
------	---------------	-------	----	-----	-------	---------	----	---------------------	--

Name of Additional Joint Inventor, If any:

☐

A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name		Suffix	
------------	--	----------------	--	-------------	--	--------	--

Inventor's Signature		Date	
----------------------	--	------	--

RESIDENCE: City	San Francisco	State		Country		Citizenship	
-----------------	---------------	-------	--	---------	--	-------------	--

POST OFFICE ADDRESS

City		State		Zip		Country		Applicant Authority	
------	--	-------	--	-----	--	---------	--	---------------------	--

Name of Additional Joint Inventor, If any:

☐

A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name		Suffix	
------------	--	----------------	--	-------------	--	--------	--

Inventor's Signature		Date	
----------------------	--	------	--

RESIDENCE: City		State		Country		Citizenship	
-----------------	--	-------	--	---------	--	-------------	--

POST OFFICE ADDRESS

City		State		Zip		Country		Applicant Authority	
------	--	-------	--	-----	--	---------	--	---------------------	--

☐

Additional inventors are being named on supplemental sheet(s) attached hereto

## DECLARATION

**ATTORNEY and/or AGENT INFORMATION**  
**(Supplemental Sheet)**

Name	Registration Number	Name	Registration Number
Brian Keating	39,520		